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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/799,158
Filing Date	03/12/2004
First Named Inventor	Patrick DeBusk
Art Unit	
Examiner Name	
Attorney Docket Number	R029 1470

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): PTO/SB/08A 4 references Return Postcard
<div>Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Womble Carlyle Sandridge & Rice, PLLC		
Signature			
Printed name	James F. Vaughan		
Date	6/30/05	Reg. No.	31,889

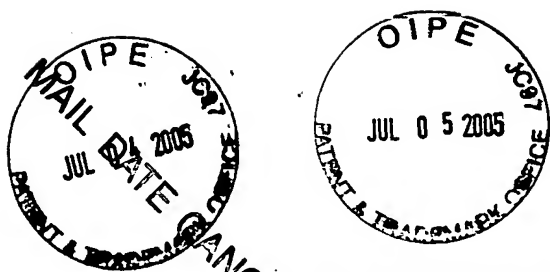
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I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Cheryl West	Date	June 30, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENTS

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of)
Patrick DeBusk)
Serial No.: 10/799,158)
Filed: March 12, 2004)
For: RECLOSABLE CARTON HAVING A)
ZIPPER OPENING TEAR STRIP)

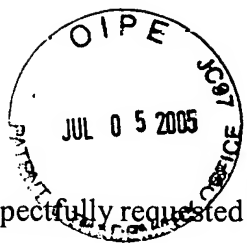
INFORMATION DISCLOSURE STATEMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

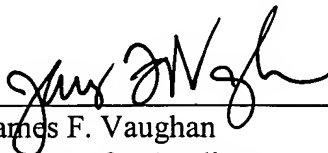
Applicant hereby voluntarily discloses the items listed on the attached Form PTO/SB/08A to the Commissioner for Patents. Copies of items B-E are enclosed. Pursuant to the Waiver in the Pre-OG Notice dated July 11, 2003, Items A is not enclosed.

Applicant further reserves the right to establish the patentability of the claimed invention over any of the listed information should they be applied as references, and/or to prove that some of the cited information may not be prior art, and/or to prove that some of the cited information may not be enabling for the teachings they purport to offer. This statement further should not be construed as a representation that an exhaustive search has been made, or that the information cited herewith is material, or that there does not exist information more material to the examination of the present Application. The Examiner is specifically requested not to rely solely on the information submitted herein. On the contrary, the Examiner is requested to conduct an independent and thorough review of the information, and to form independent opinions as to their significance.



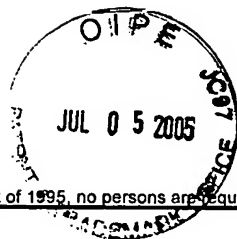
It is respectfully requested that the Examiner initial and return copies of the enclosed PTO/SB/08A and to indicate in the official file wrapper of the above-identified patent application that each item of the cited information has been considered.

Date: 6/30/05


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Docket No.: R029 1470



Substitute for Form 1449-PTO

(Use as many sheets as necessary)

Attorney Docket Number	R029 1470
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